

1011 Plum Street SE P.O. Box 42525 Olympia, WA 98504-2525 Phone: 360/725-2733

Email: buc@commerce.wa.gov

BOND 101 REPORT FORM

| Issue ID: 1502-001 Date Sul | | | | | | | |
|--|--|------------|---------------------------------|--|--|--|--|
| | | | | | | | |
| Issuer Information | | | | | | | |
| Name of Issuer: | WSHFC | | | | | | |
| Address of Issuer: | 1000 2nd Avenue, Suite 2700 Seattle, WA 98104 | | | | | | |
| Issue Type: | State | | | | | | |
| Principle User, if different than issuer: | Copper Lane Apts, LLC | | | | | | |
| Counties in which the entity using the bond proceeds is located: | Clark ☐ Various Counties - More than four ☐ Statewide | | | | | | |
| Issue Type and Title | | | | | | | |
| Was this bond voter approved? | ☐ Yes ■ No | | | | | | |
| Exact title of issue: | Washington State Housing Finance Commission Multifamily Revenue Note (Copper Lane Apartments Project), Series 2015 | | | | | | |
| Issue Sale Method: | Private Placement If Competitive Bid, number of bids: | | | | | | |
| Debt Type: | Revenue Note | | | | | | |
| Debt Category: | Note | | | | | | |
| Series: | 2015 | | | | | | |
| 6-DIGIT CUSIP: | | | | | | | |
| New/Refund/Combo: | New Issue | | | | | | |
| CUSIP(S) of Refunded Bonds: | | | | | | | |
| Private Placement Number(s): | | | | | | | |
| Series or Issue Year of Refunded Bonds: | | | | | | | |
| Advance Refund? | ☐ Yes ☐ No | | | | | | |
| Net Present Value Savings: | | | | | | | |
| | Is | ssue Dates | | | | | |
| Dated Date of Issue: 01/28/2015 | | | Issue Closing Date: 01/28/2015 | | | | |
| Date of Issue Sale: 01/28/2015 | | | Issue Maturity Date: 02/01/2033 | | | | |
| Issue Purpose | | | | | | | |
| Purpose Type: | Housing | | | | | | |
| Purpose of Proceeds: | New const of 216–unit multifamily housing in Vancouver | | | | | | |



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| Is this a Bond Cap issuance? | ■ Yes □ No If yes: Bond Cap Use Category: Housir Project Title: Copper Lane Apart Bond Cap Amount: \$19,000,000 | ments | | | | | |
|----------------------------------|--|------------------|--|----------|--------|----------|--|
| | Par Value and | I Interest Rates | | | | | |
| | NEW | | | | REFUND | | |
| Tax-Exempt Par Value: | \$19,000,000.00 | | | | | | |
| Taxable par Value: | \$0.00 | | | | | | |
| Total Par Value: | \$19,000,000.00 | | | | | | |
| Net Tax-Exempt Interest Rate: | • | Variable | | | | Variable | |
| Net Taxable Interest Rate: | 0% | Variable | | | | Variable | |
| Discount: | | Estimate | | | | Estimate | |
| Premium: | | Estimate | | | | Estimate | |
| Yield: | | | | | | | |
| | Issue | Costs | | | | | |
| Underlying Security | Project Rents/Revenues | | | | | | |
| Gross Underwriting Spread: | | \$0.00 | | Estimate | | | |
| Underwriting Spread per \$1,000: | | \$0.00 | | | | | |
| Bond Counsel Fee: | | \$48,333.00 | | Estimate | | | |
| Legal/Underwriter's Counsel Fee: | | \$0.00 | | Estimate | | | |
| Adminsitrative/Commission Fee: | | \$71,799.58 | | Estimate | | | |
| Feasiblity Study Cost: | | \$0.00 | | Estimate | | | |
| Rating Agency Fee: | | \$0.00 | | Estimate | | | |
| Trustee Fee: | | \$4,275.00 | | Estimate | | | |
| Credit Enhancement: | | \$0.00 | | Estimate | | | |
| Escrow Costs: | | \$0.00 | | Estimate | | | |
| Financial Advisor Fee: | | \$0.00 | | Estimate | | | |
| Placement Agent: | | | | Estimate | | | |
| Bond Insurance: | | \$0.00 | | Estimate | | | |
| Printing, inc. Office Statement: | | \$0.00 | | Estimate | | | |
| Out-of-State Travel: | | \$0.00 | | Estimate | | | |
| Miscellaneous: | | \$0.00 | | Estimate | | | |
| Issuance Team | | | | | | | |
| Name of Financial Advisor: | | | | | | | |
| Name of Bond Counsel: | Pacifica Law Group LLP | | | | | | |
| Name Of Lead Underwiter(s): | | | | | | | |



(206) 287-4482

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| Name Of Company Insuring Bond: | | | | |
|------------------------------------|--|--|--|--|
| Name of Bond Registrar: | US Bank National Association | | | |
| Escrow Agent/Trustee: | | | | |
| Bond Ratings | | | | |
| Standard & Poor's: | | | | |
| Moody's: | | | | |
| Fitch: | | | | |
| Other | | | | |
| Attachments | | | | |
| Are bond covenants available? | ■ Yes □ No | | | |
| s an Official Statement available? | ☐ Yes ■ No | | | |
| Reporter Contact Information | | | | |
| Reporter Name: | Jacob Richardson | | | |
| Title: | Program Specialist | | | |
| Affiliation: | WSHFC | | | |
| Address: | 1000 2nd Avenue, Suite 2700 Seattle, WA 98104 | | | |
| Email: | iacob richardson@wshfc.org | | | |

Phone: